

# Disclosure Report Cover

Amendment

☐ Yes ☐ No

Use this form for general report and committee information, must be signed and submitted along with other detailed forms.  
Do not use this form to update information.

## 1. Committee Information

a. Full Name	c. ID Number
Wesley Hickman For Commissioner	WDF940
b. Mailing Address (include City, State and Zip Code)	d. Date Filed
1121 Foxbow Cove	12/1/15
Leland, NC 28451	e. Phone Number
	910-274-3847

## 2. Report Year 3. Period Start Date (mm/dd/yy) 4. Period End Date (mm/dd/yy) 5. Treasurer Full Name

2016 December 22, 2015 December 31, 2015 Susan Rutter

## 6. Type of Committee (Check One)

- ☒ Candidate Campaign ☐ Party  
☐ PAC ☐ Referendum  
☐ Independent Expenditure ☐ Joint Fundraiser  
☐ Legal Expense Fund

## 7. Type of Fund (if applicable, check one)

- ☐ Booster Fund  
☐ Building Fund  
☐ Other:

## 8. Number of Fundraisers this Report

## 9. Type of Report (check only one type of report from one category)

- | Municipal                                | State/County                                 | Referendum                                  |
|------------------------------------------|----------------------------------------------|---------------------------------------------|
| <input type="checkbox"/> Organizational  | <input type="checkbox"/> Organizational      | <input type="checkbox"/> Organizational     |
| <input type="checkbox"/> Thirty-five day | <input type="checkbox"/> Quarterly           | <input type="checkbox"/> Pre-referendum     |
| <input type="checkbox"/> Pre-primary     | <input type="checkbox"/> First               | <input type="checkbox"/> Final              |
| <input type="checkbox"/> Pre-election    | <input type="checkbox"/> Second              | <input type="checkbox"/> Supplemental Final |
| <input type="checkbox"/> Pre-runoff      | <input type="checkbox"/> Third               | <input type="checkbox"/> Annual             |
| <input type="checkbox"/> Semi-annual     | <input type="checkbox"/> Fourth              | <input type="checkbox"/> Special            |
| <input type="checkbox"/> Mid Year        | <input type="checkbox"/> Semi-annual         |                                             |
| <input type="checkbox"/> Year End        | <input type="checkbox"/> Mid Year            |                                             |
| <input type="checkbox"/> Final           | <input checked="" type="checkbox"/> Year End |                                             |
| <input type="checkbox"/> Special         | <input type="checkbox"/> Final               |                                             |
|                                          | <input type="checkbox"/> Special             |                                             |

## 10. Special Report Name

## 11. Account Information

### a. Financial Institution Full Name

BB & T

### b. Purpose

Campaign

### c. Account Code

0811

### d. Period Begin Balance

\$ 1.00

## 11. Account Information

### a. Financial Institution Full Name

### b. Purpose

### c. Account Code

### d. Period Begin Balance

\$

## CERTIFICATION

I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct and that I have been trained by the NC State Board of Elections.

Susan Rutter

Printed Name of Signer

Susan Rutter

Signature of Appointed Treasurer

1/21/16

Date

## FOR OFFICE USE ONLY

Date Received:

Employee:

Date Postmarked:

Employee:

Date Scanned:

Employee:

Date Data Entered:

Employee:

## Delivery Method

- ☐ Normal Mail  
☐ Registered Mail  
☒ Hand Delivered  
☐ Electronically Filed  
☐ Signer has not received mandatory training

**Please Note:** This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information.

You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.

# Detailed Summary

Amendment

☐ Yes ☐ No

Use this form to summarize all disclosure reporting forms and to total monetary information

1. Committee Full Name (and Fund if applicable)		2. Type of Report	3. ID Number
Wesley Hickman For Commissioner		2015 Year end semi annual	WDF940
Start of Election Cycle: January 1, 2016		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 1.00	\$ 1.00
<b>RECEIPTS</b>			
5) Aggregated Contributions from Individuals (CRO-1205)		\$	\$
6) Contributions from Individuals (CRO-1210)		\$	\$
7) Contributions from Political Party Committees (CRO-1220)		\$	\$
8) Contributions from Other Political Committees (CRO-1230)		\$	\$
9) Loan Proceeds (CRO-1410)		\$	\$
10) Refunds/Reimbursements to the Committee (CRO-1240)		\$	\$
11) Other Receipt Sources			
11a) Interest on Bank Accounts (CRO-1250)		\$	\$
11b) Contributions from Not-For-Profit Organizations (CRO-1250)		\$	\$
11c) Outside Sources of Income (CRO-1250)		\$	\$
11d) Legal Expense Fund - Other Sources (CRO-1270)		\$	\$
11e) Exempt Purchase Price Sales (CRO-1265)		\$	\$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)		\$ 0	\$ 0
<b>EXPENDITURES</b>			
13) Disbursements			
13a) Operating Expenditures (CRO-1310)		\$	\$
13b) Contributions to Candidates/Political Committees (CRO-1310)		\$	\$
13c) Coordinated Party Expenditures (CRO-1310)		\$	\$
14) Aggregated Non-Media Expenditures (CRO-1315)		\$	\$
15) Loan Repayments (CRO-1420)		\$	\$
16) Refunds/Reimbursements from the Committee (CRO-1320)		\$	\$
17) In-Kind Contributions (CRO-1510)		\$	\$
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 0	\$ 0
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 1.00	\$ 1.00
<b>ADDITIONAL INFORMATION</b>			
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)		\$	
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)		\$	
22) Debts and Obligations owed by the Committee (CRO-1610)		\$	
23) Debts and Obligations owed to the Committee (CRO-1620)		\$	
24) Account Transfers Within the Committee (CRO-1720)		\$	
25) Administrative Support (CRO-1710)		\$	\$
26) Forgiven Loans (CRO-1440)		\$	\$
27) 48-Hour Notice Reports Sum (CRO-2220)		\$	\$
28) Contributions to be Refunded (CRO-1215)		\$	\$